Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF CALIFORNIA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Allison	
	your government-issued picture identification (for	First name	First name
	example, your driver's license or passport).	D.	
		Middle name	Middle name
	Bring your picture identification to your	Soto	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names and any assumed, trade names and doing business as names.	Allison D. Peterson	
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8725	

De	btor 1 Allison D. Soto		Case number (if known)			
4.	Your Employer Identification Number (EIN), if any.	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
5.	Where you live	1928 E. Seeger Ave. Visalia, CA 93292	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Tulare County	Operation			
		County	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	in here. Note that the court will send any notices to this			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Del	otor 1	Allison D. Soto					Case number (if known)		
Pai	t 2:	Tell the Court About	Your Bankrı	iptcy C	ase				
7.	Banl	chapter of the kruptcy Code you are osing to file under				each, see <i>Notice Required b</i> nge 1 and check the appropri	y 11 U.S.C. § 342(b) for Individuals Filing for Bar ate box.	nkruptcy	
	01100	omy to me under	Chapter 7						
			☐ Chapte	r 11					
			☐ Chapte	r 12					
			☐ Chapte	r 13					
8.	How	you will pay the fee	abou orde	t how yo	ou may pay. Typica	lly, if you are paying the fee	eck with the clerk's office in your local court for m yourself, you may pay with cash, cashier's check half, your attorney may pay with a credit card or	, or money	
							tion, sign and attach the Application for Individua	ls to Pay	
				-	•	Official Form 103A).	on only if you are filing for Chapter 7. By law, a jւ	idae may	
			but is that	s not rec applies t	quired to, waive you to your family size a	r fee, and may do so only if y and you are unable to pay the	corrections in your are filling for Griapter 7. By law, a justice income is less than 150% of the official pove of fee in installments). If you choose this option, you (Official Form 103B) and file it with your petition.	erty line ou must fill	
9.		you filed for	■ No.						
		ruptcy within the 8 years?	☐ Yes.						
				District	·	When	Case number		
				District		When	Case number		
				District		When	Case number		
10.		nny bankruptcy s pending or being	■ No						
	filed not f you,	by a spouse who is iling this case with or by a business ier, or by an	☐ Yes.						
				Debtor			Relationship to you		
				District	1	When	Case number, if known		
				Debtor			Relationship to you		
				District		When	Case number, if known		
11.		ou rent your ence?	■ No.	Go to I	ine 12.				
			☐ Yes.	Has yo	ur landlord obtaine	d an eviction judgment again	st you?		
					No. Go to line 12.				
					Yes. Fill out <i>Initial</i> this bankruptcy pe		Judgment Against You (Form 101A) and file it a	s part of	

Del	otor 1 Allison D. Soto			Case number (if known)		
Pai	Report About Any Bu	ısinesses	You Own as a Sole Proprie	etor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.			
	2.	☐ Yes.	Name and location of bu	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ate & ZIP Code		
	it to this petition.		Check the appropriate be	ox to describe your business:		
			☐ Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))		
			☐ Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))		
			☐ Stockbroker (as o	defined in 11 U.S.C. § 101(53A))		
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
			☐ None of the above	е		
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?	deadline operatio	s. If you indicate that you are	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of small business debtor, see 11	No.	I am not filing under Chapter 11.			
	U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Chapter and I do not choose to pr	11, I am a small business debtor according to the definition in the Bankruptcy Code, oceed under Subchapter V of Chapter 11.		
		☐ Yes.	I am filing under Chapter and I choose to proceed	11, I am a small business debtor according to the definition in the Bankruptcy Code, under Subchapter V of Chapter 11.		
Par	Report if You Own or	Have An	y Hazardous Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?			
				Number, Street, City, State & Zip Code		

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about cre	dit
counseling because of:	

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Allison D. Soto			Case numbe	「 (if known)		
Par	t 6: Answer These Questi	ons for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		ness debts? Business debts are debts ment or through the operation of the bus			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe	that are not consumer debts or busines	ss debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.			
	Do you estimate that after any exempt	■ Yes.		you estimate that after any exempt prop Il be available to distribute to unsecured			
	Do you estimate that		□ No				
			Yes				
18.	How many Creditors do	1 4 40		□ 1,000-5,000	□ 25,001-50,000		
	you estimate that you	■ 1-49 □ 50-99		☐ 5001-10,000	☐ 50,001-30,000 ☐ 50,001-100,000		
	owe?	☐ 100-1		☐ 10,001-25,000	☐ More than100,000		
		□ 200-9	99				
19.		□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
			01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		□ \$500,	001 - \$1 million	— \$100,000,001 * \$500 million	LI More trail \$30 billion		
20.		□ \$0 - \$	•	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	to be?		001 - \$100,000 001 - \$500,000	■ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
		. ,	001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
				<u> </u>			
Pari	7: Sign Below						
-or	you	I have ex	amined this petition, and I declar	e under penalty of perjury that the inform	nation provided is true and correct.		
				am aware that I may proceed, if eligible, f available under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.		
				pay or agree to pay someone who is no otice required by 11 U.S.C. § 342(b).	t an attorney to help me fill out this		
		l request	relief in accordance with the cha	pter of title 11, United States Code, spec	cified in this petition.		
		l underst bankrupt 1519, and	cy case can result in fines up to \$	ncealing property, or obtaining money o 250,000, or imprisonment for up to 20 y	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341,		
		Allison Signature	D. Soto e of Debtor 1	Signature of Debtor	2		
		Executed	Ion 11 25 24	Executed on			
			MMY DD YYYY		/ DD / YYYY		

Debtor 1	Allison	D. Soto
Deptoi	AIIISUII	D. SULU

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Signature of Attorney for Debtor

Date

MM/DD/KYYY

MARK A. ZIMMERMAN 179762

Printed name

LAW OFFICES OF MARK A. ZIMMERMAN

mul

Firm name

707 N. Douty St. HANFORD, CA 93230

Number, Street, City, State & ZIP Code

Contact phone 559-584-7274

Email address

notices@zimmermanesq.com

179762 CA

Bar number & State

Fill	n this information to identify your c	ase:			
	tor 1 Allison D. Soto				
	First Name	Middle Name	Last Name		
	tor 2 se if, filing) First Name	Middle Name	Last Name		
Unit	ed States Bankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA		
Cas	e number				
(if kn					t if this is an
				amen	ded filing
Of•	icial Earna 106Cura				
	icial Form 106Sum	nd I iabilities ar	nd Certain Statistical Information		12/15
			e are filing together, both are equally responsible		
info		first; then complete the	he information on this form. If you are filing amen		
_	1: Summarize Your Assets	•			
Araina a	Outside Four Appoint			Your a	
					of what you own
1.	Schedule A/B: Property (Official Form			œ	0.00
					0.00
	1b. Copy line 62, Total personal prope	rty, from Schedule A/B		\$	52,777.29
	1c. Copy line 63, Total of all property of	on Schedule A/B		. \$	52,777.29
Part	2: Summarize Your Liabilities				
					abilities t you owe
2.	Schedule D: Creditors Who Have Clai. 2a. Copy the total you listed in Column	ms Secured by Property า A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	83,059.00
3.	Schedule E/F: Creditors Who Have Ur 3a. Copy the total claims from Part 1		l Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from Part 2	(nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	10,269,059.00
			Your total liabilities	\$	10,352,118.00
			rour total nashinges		10,332,110.00
Part	3: Summarize Your Income and E	xpenses			
4.	Schedule I: Your Income (Official Form	n 106I)			
			1	\$	9,459.48
5.	Schedule J: Your Expenses (Official F Copy your monthly expenses from line			\$	9,508.39
Part	4: Answer These Questions for Ac	dministrative and Statis	stical Records		
6.	Are you filing for bankruptcy under ☐ No. You have nothing to report or		neck this box and submit this form to the court with y	our other sc	hedules.
7.	■ Yes What kind of debt do you have?				
	■ Your debts are primarily consu	mer debts. Consumer d	lebts are those "incurred by an individual primarily for	a nersonal	family or
			g for statistical purposes. 28 U.S.C. § 159.	a porsonal,	idiniy, O

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

10,000.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this	s information to identify your cas	se and this filing:		
Debtor 1	Allison D. Soto			
	First Name	Middle Name Last Name		
Debtor 2				
(Spouse, if fil	ling) First Name	Middle Name Last Name		
United Sta	ates Bankruptcy Court for the: EA	STERN DISTRICT OF CALIFORNIA		
Case num	nber			☐ Check if this is an amended filing
			1:	amonada ming
Officia	al Form 106A/B			
Sche	dule A/B: Proper	ty		12/15
more space	e is needed, attach a separate sheet to	ible. If two married people are filing together, both are equ this form. On the top of any additional pages, write your r nd, or Other Real Estate You Own or Have an Interest In	ally responsible for supplying ame and case number (if known	correct information. If wn). Answer every question
1. Do you o	own or have any legal or equitable inte	rest in any residence, building, land, or similar property?		
No. G	io to Part 2.			
☐ Yes.	Where is the property?			
Part 2: De	escribe Your Vehicles			
Do you ow someone e	vn, lease, or have legal or equital else drives. If you lease a vehicle, a	ole interest in any vehicles, whether they are regis lso report it on Schedule G: Executory Contracts and	tered or not? Include any v Unexpired Leases.	vehicles you own that
B. Cars, v	ans, trucks, tractors, sport utility	vehicles, motorcycles		
□ No				
■ Yes				
3.1 Mak	VI	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	d claims on Schedule D:
Mod Yea		Debtor 1 only	Creditors Who Have Clair	ns Secured by Property.
	proximate mileage: 75000	Debtor 2 only	Current value of the	Current value of the
	er information:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
		Check if this is community property (see instructions)	\$32,043.00	\$32,043.00
3.2 Mak	e: Mercedes-Benz	Who has an interest in the property? Check one	Do not deduct secured cla	aims or exemptions. Put
Mod	0000	Debtor 1 only	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
Year	7,	Debtor 1 only Debtor 2 only		· · · ·
	roximate mileage: 90000		Current value of the entire property?	Current value of the portion you own?
	er information:	At least one of the debtors and another	brahord ,	portion you omit
		☐ Check if this is community property (see instructions)	\$18,501.00	\$9,250.50

Den	tor i A	illison D.	010		Case	e number (ir known)	
4. W	atercraft,	aircraft, m	otor homes, ATVs an	d other recreational veh	nicles, other vehicles, and snowmobiles, motorcycle ac	accessories	
EX	ampies: b	oats, trailer	s, motors, personal wa	itercraft, fishing vessels, s	snowmobiles, motorcycle ac	ccessories	
	No						
	Yes						
4.1	Make:	Indian		Who has an interest in th	e property? Check one		
				_	o property remarkant		claims or exemptions. Put red claims on Schedule D:
	Model:	Scout		Debtor 1 only			aims Secured by Property.
	Year:	2022		Debtor 2 only		Current value of the	Current value of the
	Other inf	ormation:		☐ Debtor 1 and Debtor 2 ☐ At least one of the debt	-	entire property?	portion you own?
		omadom.		☐ Check if this is comm		\$11,745.00	\$5,872.50
				(see instructions)	unity property	V11,140.00	
5 Δ	dd the da	dar value (of the portion you ow	n for all of your optrion t	rom Part 2, including any	· anti-ing for	
.p	ages you	have attac	hed for Part 2. Write	that number here	Tom Part 2, including any	entries for ==>	\$47,166.00
Part	3: Descril	be Your Pers	onal and Household Ite	ms			
Do y	ou own o	r have any	legal or equitable in	terest in any of the follow	ving items?		Current value of the
							portion you own? Do not deduct secured
							claims or exemptions.
6. H	ousehold	goods and	furnishings	ables the			
	λαιτιρι σ δ. Ι Ι Νο	мајог аррпа	inces, furniture, linens,	, china, kitchenware			
	Yes. De	scribe					
			Household Good	ds			\$3,000.00
-							
7. Ele	ectronics						
E	xamples: ",	Televisions	and radios; audio, vide	o, stereo, and digital equi	pment; computers, printers	, scanners; music colle	ctions; electronic devices
	No I	ncluaing ce	Il phones, cameras, m	edia players, games			
_	Yes. Des	scribe					
_	100. DC	301100					
			1 TV				
			1 Cellphones				\$500.00
	llectibles						
Ex	kamples: A	Antiques and	d figurines; paintings, p ions, memorabilia, coll	prints, or other artwork; bo	oks, pictures, or other art o	bjects; stamp, coin, or l	paseball card collections;
	No	oriei collect	ions, memorabilia, col	ecubies			
	Yes. Des	cribe					
			ind hobbies	d athar hallby, and down	Manager and the second second		
LX	rampies, s	nusical inst	ographic, exercise, and ruments	other nobby equipment;	bicycles, pool tables, golf c	lubs, skis; canoes and	kayaks; carpentry tools;
	No						
	Yes. Des	cribe					
40 =							
	rearms	Pistole rifle	e chataune ammunit	on, and related equipmen	4		
	No	i iaioia, tille	o, onotyuno, ammuniti	on, and related equipmen	L		
	Yes. Des	cribe					
_							
			S&W Revolver				\$250.00

Debtor 1 Allison D. So	oto	Case number (if known)	
11. Clothes Examples: Everyday clo	othes, furs, leather coats, de	signer wear, shoes, accessories	
□ No	rando, rand, radarar douto, do	5.9.13. 110.110.110.110.110.110.110.110.110.11	
Yes. Describe			
	Clothes		\$200.00
12. Jewelry Examples: Everyday iew	velry, costume iewelry, enga	agement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
■ No	, , , , , , , , , , , , , , , , , , ,		gold, olivoi
☐ Yes. Describe			
13. Non-farm animals			
Examples: Dogs, cats, t	birds, horses		
■ No			
☐ Yes. Describe			
14. Any other personal and	d household items you did	not already list, including any health aids you did not list	
■ No		-	
☐ Yes. Give specific info	ormation		
45 4114 10			
for Part 3. Write that r	of all of your entries from F number here	Part 3, including any entries for pages you have attached	\$3,950.00
			3
Part 4: Describe Your Financi	ial Assets		
Do you own or have any le		any of the following?	Current value of the
			portion you own?
			Do not deduct secured claims or exemptions.
16. Cash			P
	ave in your wallet, in your ho	ome, in a safe deposit box, and on hand when you file your petiti-	on
■ No			
☐ Yes			
17. Deposits of money			
Examples: Checking, sa	ivings, or other financial acco	ounts; certificates of deposit; shares in credit unions, brokerage	houses, and other similar
Institutions. I	t you have multiple accounts	s with the same institution, list each.	
■ Yes		Institution name:	
	17.1. Checking	Community West Bank	\$1,661.29
8. Bonds, mutual funds, o	or publicly traded stocks		
_	investment accounts with bro	okerage firms, money market accounts	
■ No	Institution or issuer	namo:	
☐ Yes	institution of issue	name.	
Non-publicly traded sto and joint venture	ck and interests in incorp	orated and unincorporated businesses, including an interes	t in an LLC, partnership,
■ No			
	rmation about them		
	Name of entity:	% of ownership:	
0. Government and corpor	rate bonds and other pegg	otiable and non-negotiable instruments	
Negotiable instruments is	nclude personal checks, cas	shiers' checks, promissory notes, and money orders.	
	nts are those you cannot tra	insfer to someone by signing or delivering them.	
No			
☐ Yes. Give specific infor			
	Issuer name:		

Official Form 106A/B

Schedule A/B: Property

page 3

De	ebtor 1	Allison D.	Soto			Case number (if kno	wn)
21.			ion accounts in IRA, ERISA, K	eogh, 401(k), 403(b), thrift savings acco	unts, or other pension or profit-sha	aring plans
	☐ Yes.	List each acc	ount separately. Type of acc	ount:	Institution name:		
22.	Your s	hare of all uni	nd prepayments used deposits you onts with landlords	have made so that , prepaid rent, public	you may continue so c utilities (electric, ga	ervice or use from a company as, water), telecommunications co	mpanies, or others
		***************************************			Institution name or	individual:	
23.	Annuit ■ No	ies (A contrac	t for a periodic pa	yment of money to	you, either for life or	for a number of years)	
	Yes.		Issuer name and	description.			
24.	Interes: 26 U.S. ■ No	ts in an educ C. §§ 530(b)(1	ation I RA, in an a I), 529A(b), and 5	account in a qualifi 29(b)(1).	ed ABLE program,	or under a qualified state tuition	ı program.
	☐ Yes		Institution name	and description. Ser	parately file the recor	rds of any interests.11 U.S.C. § 52	1(c):
	■ No				than anything listed	d in line 1), and rights or powers	exercisable for your benefit
			information about				
	Patents Examp	s, copyrights ples: Internet d	trademarks, tradomain names, we	de secrets, and othe bsites, proceeds fro	ner intellectual prop om royalties and licer	perty nsing agreements	
0	☐ Yes.	Give specific	information about	them			
	License Examp ■ No	es, franchises les: Building p	s, and other gene ermits, exclusive	eral intangibles licenses, cooperativ	e association holdin	gs, liquor licenses, professional lic	enses
İ	☐ Yes.	Give specific	information about	them			
Мо	ney or p	property owe	d to you?				Current value of the portion you own?
							Do not deduct secured claims or exemptions.
	Tax refo	unds owed to	you				
		Give specific in	nformation about t	hem, including whe	ther you already filed	the returns and the tax years	6
	<i>Exampl</i> ■ No		or lump sum alimo	ony, spousal support	t, child support, mair	ntenance, divorce settlement, prop	erty settlement
	<i>Exampl</i> ■ No	es: Unpaid wa	inpaid idans you n	urance payments, d nade to someone el	isability benefits, sic se	k pay, vacation pay, workers' com	pensation, Social Security
31.	Interest	s in insurances: Health, dis	e policies ability, or life insu	rance; health saving	js account (HSA); cr	edit, homeowner's, or renter's insu	ırance
	No			each policy and list		Beneficiary:	Surrender or refund value:

Debtor 1	Allison D. Soto	Case number (if known)	
If you a someon	erest in property that is due you from someone who has die are the beneficiary of a living trust, expect proceeds from a life in the has died. Give specific information	d surance policy, or are currently entitled to re	eceive property because
Examp ■ No	against third parties, whether or not you have filed a lawsuiles: Accidents, employment disputes, insurance claims, or rights Describe each claim		
■ No	ontingent and unliquidated claims of every nature, including	g counterclaims of the debtor and rights	to set off claims
-	ancial assets you did not already list		
■ No □ Yes.	Give specific information		
36. Add the for Pa	ne dollar value of all of your entries from Part 4, including ar rt 4. Write that number here	ny entries for pages you have attached	\$1,661.29
Part 5: Des	cribe Any Business-Related Property You Own or Have an Interest In.	List any real estate in Part 1.	
37. Do you o	wn or have any legal or equitable interest in any business-related prop	perty?	
Yes. Go			
Part 6 Des	cribe Any Farm- and Commercial Fishing-Related Property You Own o u own or have an interest in farmland, list it in Part 1.	or Have an Interest In.	
No. 6	own or have any legal or equitable interest in any farm- or c So to Part 7. Go to line 47.	ommercial fishing-related property?	
Part 7:	Describe All Property You Own or Have an Interest in That You Did N	ot List Above	
Example ■ No	have other property of any kind you did not already list? es: Season tickets, country club membership Sive specific information		
54. Add th	e dollar value of all of your entries from Part 7. Write that nu	mber here	\$0.00

Deb	otor 1 Allison D. Soto		Case number (if known)	
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$47,166.00		
57.	Part 3: Total personal and household items, line 15	\$3,950.00		
58.	Part 4: Total financial assets, line 36	\$1,661.29		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$52,777.29	Copy personal property total	\$52,777.29
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$52,777.29

Fill in this infor	mation to identify your	case:		
Debtor 1	Allison D. Soto	I Calalla Massa		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C)F CALIFORNIA	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

to 1	the applicable statutory amount.					
Pā	art 1: Identify the Property You Claim as	Exempt				
1.	Which set of exemptions are you claiming	ng? Check one only, eve	en if y	our spouse is filing with you.		
	You are claiming state and federal nonb	ankruptcy exemptions.	11 U.	S.C. § 522(b)(3)		
	☐ You are claiming federal exemptions. 1	1 U.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A	/B that you claim as ex	empt,	, fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	2022 Indian Scout Line from Schedule A/B: 4.1	\$5,872.50		\$259.00	C.C.P. § 703.140(b)(5)	
	Line from Schedule AVB. 4.1			100% of fair market value, up to any applicable statutory limit		
	Household Goods Line from Schedule A/B: 6.1	\$3,000.00		\$3,000.00	C.C.P. § 703.140(b)(3)	
	Line from Schedule Alb. V.1			100% of fair market value, up to any applicable statutory limit		
	1 TV 1 Cellphones	\$500.00		\$500.00	C.C.P. § 703.140(b)(3)	
	Line from Schedule A/B: 7.1	*		100% of fair market value, up to any applicable statutory limit		
	S&W Revolver Line from Schedule A/B: 10.1	\$250.00		\$250.00	C.C.P. § 703.140(b)(5)	
Line from Schedule A/B: 10.1	Line from Schedule A/B. 10.1	:		100% of fair market value, up to any applicable statutory limit		
	Clothes Line from Schedule A/B: 11.1	\$200.00		\$200.00	C.C.P. § 703.140(b)(3)	
	LINE HOM Scriedule AVD. 11.1			100% of fair market value, up to		

any applicable statutory limit

ebtor 1	Allison D. Soto			Case number (if known)	
	description of the property and line on dule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	cking: Community West Bank	\$1,661.29		\$1,661.29	C.C.P. § 703.140(b)(5)
20				100% of fair market value, up to any applicable statutory limit	
	rou claiming a homestead exemption ect to adjustment on 4/01/25 and every				ent.)
	No	,			,
	Yes. Did you acquire the property cove	red by the exemption w	ithin 1	.215 days before you filed this case	a?
	□ No			,	•
	— □ Yes				

Debtor 1 Allison D. Soto First harve Debtor 2 Repose #, filing) First harve Middle Name Last Nam						
Debtor 2 Spouse K, lings First Name Model Name Last Name	Fill in this information to i	dentify you	ır case:			
Debtor 2 Segment Fing) First Name Midds Name Last Name Last Name	Debtor 1 Allison	D. Soto				
United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA Case number If the court of the country of the cou	First Name	Э	Middle Name Last Name		-	
United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA Case number [If nonem) Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is mended, copy the Additional Page, all fill tool, number the entires, and attach it to this form. On the top of any additional pages, write your name and case number (if known). In on any creditors have claims secured by your property? In No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. If yes, Fill in all of the information below. Extra-List All Secured Claims 2. List all secured claims. If a credition has more into secured dains, list the credition separably for claims as possible, list the claims is alphabetical order according to the credition as prosents in the court with your other schedules. You have nothing else to report on this form. Extra-List All Secured Claims 2. List all secured claims. If a credition has more itself the credition separably for claims as possible, list the claims is alphabetical order according to the credition. International claims of the claims has alphabetical order according to the credition as provided the claims has alphabetical order according to the credition. International claims of claims. Credit Bureau Dispute PO Box 259407 Plano, 17 78025 Noney, sheat, Clip, Sale & 2p Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt. Contingent Destor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debt			56111.5		-	
Case number (it stowns) Check if this is an amended filing Check if this is an amended according to this rectangle filing the chain is an amended filing Check if this is an amended according to the credit of this is an amended filing and amended filing Check if this is an amended filing Check if this is an amended filing and amended filing and amended filing Check if this is an amended according to the inceditor and amother incedition and amother i	(Spouse it, filing) First Name	9	Middle Name Last Name			
Column B Continue I c	United States Bankruptcy Co	ourt for the	EASTERN DISTRICT OF CALIFORNIA			
Column B Continue I c			3 		-	
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing togethe, both are equally responsible for supplying correct information. If more space is received, copy the Additional Page, write your name and case number (if increm). 1 On any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. 2 Ves. Fill in all of the information below. 2 In It all secured claims. If a creditor has more secured daim, list the other creditors separately for each claim. It is the other creditor separately for each claim. It is the other creditors in Part 2, an much as possible, list the claims in alphabetical order according to the creditors and each claim. It may then none according to the creditor's name. 2 List all secured claims. If a creditor has more secured daim. It is the other creditor separately for each claim. It is the other creditor's name. 2 List all secured claims. If a creditor has more secured claims. In a creditor has more secured as particular claim, its the other creditor's name. 2 List all secured claims. If a creditor has more secured claims. To ord deduct the value of colaims. 3 List all secured claims. If a creditor has more secured the claims. 2 Column A A mount of claim. 2 To ord deduct the value of colaims. 3 List all secured claims. If a creditor has more secured the claims. 3 List all secured claims. If a creditor has more secured the secures the claims. 3 List all secured claims. If a creditor has more secured the secures the claims. 3 List all secured claims. 3 List all secured claims. 4 Liest one of the debtor and another claims. 2 Column B 2 Credit Bureau Dispots. 3 List and before 2 only 3 Estatory for the claim is check at that apply. 4 Liest one of the debtor and another claims. 5 List All Secured Claims. 5 List All Secured Claims. 5 List All Secured Cla						
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is accomplete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is the court with your other schedules. You have nothing else to report on this form. In our or creditors have claims as a particular claim, list the ceditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If continued the claim is claim. If more than one creditor has a particular claim, list the creditor separately for each claim. If continued claims and claims claims claims and claims list the creditor separately for each claim. If creditor has a	(If Known)					
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No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Column A	needed, copy the Additional Pag	s possible. If ge, fill it out,	two married people are filing together, both are ed number the entries, and attach it to this form. On the	qually responsible for sup the top of any additional p	plying correct information pages, write your name a	on. If more space is nd case number (if
Test It is all of the information below. Part 1: List All Secured Claims List All Secured Claims List All Secured Claims Column A Column A Amount of claim Secured Claims Manual Final Secured Claims Secured	1. Do any creditors have claims	secured by	your property?			
Test It is all of the information below. Part 1: List All Secured Claims List All Secured Claims List All Secured Claims Column A Column A Amount of claim Secured Claims Manual Final Secured Claims Secured				You have nothing else	to report on this form	
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Capital One Auto Finan Describe the property that secures the claim: \$41,590.00 \$32,043.00 \$9,547.00	each claim. If more than one cre- as possible, list the claims in alph	ditor has a pa nabetical orde	articular claim, list the other creditors in Part 2. As muc er according to the creditor's name			
Credit Bureau Dispute PO Box 259407 Plano, TX 75025 Number, Street, Cily, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtors and another Check if this claim relates to a community debt Date debt was incurred 03/2022 Last 4 digits of account number Creditor's Name T300 E. Hampton Ave. Ste. 101 Mesa, AZ 85209 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 3 one Check if the debtors one and another Creditor's Name T300 E. Hampton Ave. Ste. 101 Mesa, AZ 85209 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor	Test New Year		a associating to the ordator's marrie.			
Credit Bureau Dispute PO Box 259407 Plano, TX 75025 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another community debt Date debt was incurred Disputed As of the date you file, the claim is: Check all that apply. As a filen, Check if this claim relates to a community debt Date debt was incurred Describe the property that secures the claim: Taylor Street, City, State & Zip Code Who owes the debt? Check one. Describe the property that secures the claim: Taylor Street, City, State & Zip Code Who owes the debt? Check one. Describe the property that secures the claim: Describe the date you file, the claim is: Check all that apply. Contingent Describe the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim	The second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a section in the second section in the section is a section in the section section in the section is a section section in the section is a section section in the section section in the section section is a section section in the section section in the section section is a section sec	inan	Describe the property that secures the claim:	\$41,590.00	\$32,043.00	\$9,547.00
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PO Box 259407 Plano, TX 75025 Contingent Check in the date you file, the claim is: Check all that apply. Contingent	Cradit Buranu Dian					
Plano, TX 75025 Number, Street, City, State & Zip Code Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Judgment lien from a lawsuit Other (including a right to offset) Purchase Money Security		ute	As of the date you file, the claim is: Check all that			
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Date debt was incurred 03/2022 Last 4 digits of account number 0101 2.2 Drivetime/Bridgecrest Creditor's Name Describe the property that secures the claim: \$29,983.00 \$18,501.00 \$11,482.00 2018 Mercedes-Benz C300 90000 miles 7300 E. Hampton Ave. Ste. 101 Mesa, AZ 85209 Number, Street, City, State & Zip Code Who owes the debt? Check one. Unliquidated Disputed Who owes the debt? Check one. At a greement you made (such as mortgage or secured car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Check if this claim relates to a Other (including a right to offset) Purchase Money Security				Money Security		
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Mesa, AZ 85209 Contingent Unliquidated Disputed Debtor 1 only Carl loan Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a Contingent Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Purchase Money Security						
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□ Debtor 1 only □ An agreement you made (such as mortgage or secured car loan) □ Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Check if this claim relates to a □ Other (including a right to offset) □ Purchase Money Security	Who owes the debt? Check on	ne.				
□ Debtor 2 only car loan) □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) ■ At least one of the debtors and another □ Check if this claim relates to a □ Other (including a right to offset) □ Purchase Money Security	Debtor 1 only			cured		
□ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Check if this claim relates to a □ Other (including a right to offset) □ Purchase Money Security	Debtor 2 only					
At least one of the debtors and another Check if this claim relates to a Other (including a right to offset) Purchase Money Security			☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ Check if this claim relates to a ☐ Other (including a right to offset) ☐ Purchase Money Security	Table 1					
- Other finding a fidit to offset)			_	Money Security		
community debt ————————————————————————————————————	community debt	-	Other (including a right to offset)	money decurity		
Date debt was incurred 08/2023 Last 4 digits of account number 0240	Date debt was incurred00/04	N23	last A digite of account			

Debtor 1 Allison D. Soto		Case number (if known)		
First Name Middle	Name Last Name			
2.3 Performance Finance	Describe the property that secures the claim:	\$11,486.00	\$11,745.00	\$0.00
Creditor's Name	2022 Indian Scout			
10509Professional Cir Ste 202 Reno, NV 89521	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	e Money Security		
Date debt was incurred 10/2022	Last 4 digits of account number 123	7		
Add the dollar value of your entries in C	column A on this page. Write that number here:	\$83,059.0	00	
If this is the last page of your form, add	the dollar value totals from all pages.	\$83,059.0	00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this	information to identify your	case:			
Debtor 1	Allison D. Soto				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	EASTERN DISTRICT	OF CALIFORNIA		
0					
Case num (if known)	per				Check if this is an
					mended filing
Official	Form 106E/F				
	le E/F: Creditors W	ho Have Unsec	cured Claims		12/15
			PRIORITY claims and Part 2 for creditors	with NONPRIORITY claim	
the Continua number (if ki	tion Page to this page. If you have nown). List All of Your PRIORITY Un	e no information to report secured Claims	eded, copy the Part you need, fill it out, n in a Part, do not file that Part. On the top		
_	creditors have priority unsecured	claims against you?			
_	Go to Part 2.				
☐ Yes.					
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims			
	creditors have nonpriority unsecu				
□ No.	You have nothing to report in this pa	rt. Submit this form to the co	ourt with your other schedules.		
Yes.					
claim, lis	st the creditor separately for each cla	nim. For each claim listed, ic	der of the creditor who holds each claim. dentify what type of claim it is. Do not list clai ave more than three nonpriority unsecured c	ims already included in Par	t 1. If more than one
4.1 Ac	ima Digital, LLC priority Creditor's Name	Last 4 digit	ts of account number	=	\$5,625.00
55	on Headquarters Dr. 7 TX 75024	When was	the debt incurred?		-
	mber Street City State Zip Code	As of the d	late you file, the claim is: Check all that ap	ply	
112-0-1	o incurred the debt? Check one.	☐ Continge	ent		
_	Debtor 1 only	☐ Unliquid	lated		
_	Debtor 2 only	☐ Disputed	d		
	Debtor 1 and Debtor 2 only		NPRIORITY unsecured claim:		
	At least one of the debtors and anot	L Student	loans		
	Check if this claim is for a comm he claim subject to offset?	unity debt	ons arising out of a separation agreement or iority claims	r divorce that you did not	
	No	☐ Debts to	pension or profit-sharing plans, and other s	similar debts	
	Yes	Other. S	Specify Other		

Debtor	1 Allison D. Soto	Case number (if known)				
4.2	Ads/Comenity/Kay Jewelers Nonpriority Creditor's Name	Last 4 digits of a	ccount number	8850	\$1,089.00	
	PO Box 182120 Columbus, OH 43218	When was the de	ebt incurred?	10/2022		
	Number Street City State Zip Code	As of the date yo	u file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRI	ORITY unsecured	d claim:		
	At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations ari report as priority c		ration agreement or divorce that you did not		
	■ No	Debts to pensi	on or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify	Credit Card	1		
4.3	Ads/Comenity/Vicoria	Last 4 digits of a	ccount number	9176	\$592.00	
	Nonpriority Creditor's Name PO Box 182789	When was the de	bt incurred?	07/2017		
	Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date yo	u file, the claim i	s: Check all that apply		
	_	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIC	l claim:			
	☐ Check if this claim is for a community debt	Student loans				
	Is the claim subject to offset?	Obligations aris				
	No	Debts to pension	on or profit-sharing	g plans, and other similar debts		
	☐ Yes	Other. Specify	Credit Card			
4.4	California Self Insurance Law, APC Nonpriority Creditor's Name	Last 4 digits of ac	count number	4855	\$10,250,000.00	
	4119 Guardian St. Simi Valley, CA 94111	When was the de	bt incurred?	01/2024		
27	Number Street City State Zip Code	As of the date you	ı file, the claim is	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		8		
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations aris		ation agreement or divorce that you did not		
	■ No	Debts to pension	n or profit-sharing	plans, and other similar debts		
			Case No. V	CL304855		
			VS.	arm Management, Inc. oree Soto, an individual and		
	□Yes	Other. Specify	dba Allison proprietors	Soto Contracting, a sole		

Debtor	Allison D. Soto	Case number (if known)				
4.5	Comenity Bank/ Express Nonpriority Creditor's Name PO Box 182789	Last 4 digits of account number When was the debt incurred?	<u>1711</u> 11/2020	\$230.00		
	Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim i				
	Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt		d claim: ration agreement or divorce that you did not			
	Is the claim subject to offset? No	report as priority claims Debts to pension or profit-sharin				
	Yes	Other. Specify Credit Card	d	=:		
4.6	Comenity Bank/Torrid Nonpriority Creditor's Name	Last 4 digits of account number	5637	\$781.00		
	P O Box 182789 Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only	When was the debt incurred? As of the date you file, the claim i Contingent Unliquidated	12/2021 s: Check all that apply			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans				
	Is the claim subject to offset?	 ☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharing 	ration agreement or divorce that you did not g plans, and other similar debts			
	Yes	Other. Specify Credit Card	l	-		
4.7	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	4796	\$1,484.00		
	PO Box 98875 Las Vegas, NV 89193	When was the debt incurred?	05/2022	3		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply			
	Debtor 1 only	☐ Contingent☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	claim:			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Student loans				
	Is the claim subject to offset?	☐ Obligations arising out of a separ report as priority claims				
	■ No	Debts to pension or profit-sharing	plans, and other similar debts			
	☐ Yes	Other. Specify Credit Card		i e		

Debto	r 1 Allison D. Soto		Case number (if known)			
4.8	Discover Bank Nonpriority Creditor's Name	Last 4 digits of account number	1149	\$3,236.00		
	PO Box 30939	When was the debt incurred?	02/2020			
	Salt Lake City, UT 84130 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent ☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:			
	At least one of the debtors and another	☐ Student loans				
	\square Check if this claim is for a community debt is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Care	j			
4.9	Midland Credit Management Nonpriority Creditor's Name	Last 4 digits of account number	2334	\$586.00		
	320 East Big Beaver Suite 300 Troy, MI 48083	When was the debt incurred?	07/2023			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:			
	☐ At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify Collection				
4.10	Nordstrom/td Bank Usa Nonpriority Creditor's Name	Last 4 digits of account number	7043	\$1,522.00		
	13531 E. Caley Ave. Englewood, CO 80111	When was the debt incurred?	11/2023			
	Number Street City State Zip Code	As of the date you file, the claim is	:: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	claim:			
	At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separ	ation agreement or divorce that you did not			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify Credit Card				

Debtor	1 Allison D. Soto	Case number (if known)					
4.11	Syncb/Lowes	Last 4 digits of account number 8192	\$988.00				
	Nonpriority Creditor's Name Po Box 965005	When was the debt incurred? 04/2022					
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	_					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify Credit Card					
4.12	Syncb/Mor Furniture	Last 4 digits of account number 1919	\$2,376.00				
	Nonpriority Creditor's Name PO Box 965036	When was the debt incurred? 03/2022	·				
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:						
	At least one of the debtors and another						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Credit Card					
4.13	Upstart Network Nonpriority Creditor's Name	Last 4 digits of account number 349	\$550.00				
	Po Box 1503 San Carlos, CA 94070	When was the debt incurred? 10/2022					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify Credit Card					
Part 3:	List Others to Be Notified About a Debt	Fhat You Already Listed					
trying t more t	s page only if you have others to be notified about to collect from you for a debt you owe to someone	t your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if else, list the original creditor in Parts 1 or 2, then list the collection agency here. d in Parts 1 or 2, list the additional creditors here. If you do not have additional pe	Similarly, if you have				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total Claim

Debtor 1 Allis	son D	. Soto	Case nu	umber (if known)	
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	O.f	Total (
Total alabas	OI.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	u 6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here	e. 6i.	\$ 10	0,269,059.00
	6j _{∈∈}	Total Nonpriority. Add lines 6f through 6i,	6 j.	\$ 10	0,269,059.00

Fill in	n this info	ormation to identify your	case:			-
Debte	or 1	Allison D. Soto				
Debte	or 2	First Name	Middle Nam	e	Last Name	
	e if, filing)	First Name	Middle Nam	е	Last Name	
Unite	d States E	Bankruptcy Court for the:	EASTERN DI	STRICT OF CALIF	ORNIA	
Case (if know	number					☐ Check if this is an amended filing
Scł	nedul				expired Leases	12/15
informadditi 1. [1. [2. L e	nation. If lonal page Do you ha No. Che Yes. Fill ist separaxample, r	more space is needed, ones, write your name and we any executory contral each this box and file this followed in all of the information but ately each person or cor	copy the addition case number (if case or unexpired or with the countellow even if the company with who	nal page, fill it out f known). d leases? t with your other so contacts of leases a	g together, both are equally respond, number the entries, and attach it hedules. You have nothing else to reare listed on Schedule A/B:Property contract or lease. Then state what eform in the instruction booklet for more	eport on this form. Official Form 106 A/B).
	Person or	company with whom y		tract or lease	State what the contract or lease	is for
2.1		Name, Number, Street, City	, State and ZIP Code			
	Name					
	Number	Street			-:	
	City	18	State	ZIP Code	-)	
2.2	Name				_	
	Number	Street				
2.3	City		State	ZIP Code		
2.0	Name				-	
	Number	Street			-	
	City		State	ZIP Code	<u> </u>	
2.4	Name				ž	
	Number	Street			-	
2.5	City		State	ZIP Code		
2.0	Name				-	
,	Number	Street				
	City	5	State	ZIP Code	-	

Eill in thin i	aformation to identify your				ė
	nformation to identify your	case			
Debtor 1	Allison D. Soto	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)) First Name	Middle Name	Last Name		
United State	s Bankruptcy Court for the:	EASTERN DISTRICT OF	CALIFORNIA		
Case numbe	er er				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106H				
-		- la 4 - u -			
scneat	ıle H: Your Cod	eptors			12/15
eople are fi ill it out, and our name a	ling together, both are equ d number the entries in the nd case number (if known)	ally responsible for supply boxes on the left. Attach and Answer every question.	ying correct informathe the Additional Page t	tion. If more space is to this page. On the t	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
1. Do yo	ou have any codebtors? (If	you are filing a joint case, do	o not list either spouse	e as a codebtor.	
□ No					
Yes					
2. Withii Arizona,	n the last 8 years, have you California, Idaho, Louisiana,	lived in a community pro Nevada, New Mexico, Puer	perty state or territor to Rico, Texas, Wash	y? (<i>Community propei</i> ington, and Wisconsin	ty states and territories include)
□ No. G	So to line 3.				
Yes. [Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
	No				
	Yes.				
	1 00.				
	In which community state	e or territory did you live?	California	. Fill in the name a	nd current address of that person.
	Antonio Soto	, ,	Gamonia		in a continue of the portion is
	Unknown				
	Name of your spouse, former spo Number, Street, City, State & Zip				
in line 2 Form 10	again as a codebtor only if	f that person is a guaranto	r or cosigner. Make	sure vou have listed	ng with you. List the person shown the creditor on Schedule D (Officia , Schedule E/F, or Schedule G to
	dumn 1: Your codebtor ne, Number, Street, City, State and Zff	° Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1 M a	aktheng Bun			■ Schedule D, I	ne 2.2
				☐ Schedule E/F	
				☐ Schedule G	
				Drivetime/Bridg	

Fill	in this information	to identify your c	ase:		PHI.					
	btor 1	Allison D. S								
	btor 2 ouse, if filling)	<u></u>				=				
Un	ited States Bankrup	tcy Court for the	EASTERN DISTRICT	OF CALIFORNIA		_,				
	se number nown)						Check if this is An amende A supplement	ed filing ent showi	ng postpetitio	
0	fficial Form	1061					MM / DD/ Y		iollowing date	2 .
	chedule I:		ome				ו /טט / ווווווו	7 7 7 7		12/15
sup spc atta	pplying correct info buse. If you are sep ich a separate she	ormation. If you parated and you	sible. If two married ped are married and not fili Ir spouse is not filing w On the top of any additi	ing jointly, and your s ith you, do not inclu	spouse de infoi	is livi matio	ing with you, inc on about your sp	lude info ouse. If n	rmation abo	ut your s needed,
1.	Fill in your emplinformation.	oyment		Debtor 1			Debtor 2	or non-1	filing spouse	
	If you have more		Employment status	■ Employed			□ Emple	☐ Employed		
	attach a separate page with information about additional employers.		Occupation	☐ Not employed Bookkeeping	□ Not			ot employed		
	include part-time, self-employed wo		Employer's name	AESFIC			? s			
	Occupation may i or homemaker, if		Employer's address	120 N. E St. Exeter, CA 9322	1					
			How long employed to	here? 15 Years	s					
Pa	rt 2: Give De	tails About Mon	nthly Income							
spo If yo	use unless you are :	separated. spouse have mo	ate you file this form. If ore than one employer, co this form.						-	-
						1	For Debtor 1		btor 2 or ing spouse	
2.	List monthly gro deductions). If no	ss wages, salar	ry, and commissions (becalculate what the month	efore all payroll ly wage would be.	2.	\$_	2,500.00	\$	N/A	
3.	Estimate and list	monthly overti	ime pay.		3	+\$	0.00	+\$	N/A	-
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4,	\$_	2,500.00	\$	N/A	

				For	Debtor 1		r Debtoi n-filing		
	Copy line 4 here		4.	\$	2,500.00	\$		N/A	
5.	List all payroll deductions:								
	5a. Tax, Medicare, and Social Security de	eductions	5a.	\$	540.52	\$		N/A	Δ
	5b. Mandatory contributions for retireme		5b.	\$	0.00	\$		N/A	
	5c. Voluntary contributions for retiremen	•	5c.	\$	0.00	\$		N/A	
	5d. Required repayments of retirement fu	· ·	5d.	\$	0.00	\$		N/A	
	5e. Insurance		5e.	\$	0.00	\$		N/A	_
	5f. Domestic support obligations		5f.	\$	0.00	\$		N/A	
	5g. Union dues		5g.	\$ -	0.00	\$		N/A	
	5h. Other deductions. Specify:		5h.+		0.00	+ \$		N/A	-
6.	Add the payroll deductions. Add lines 5a+5	 h+5c+5d+5e+5f+5g+5h	6.	\$ \$	540.52	. Ψ		N/A	
7.	Calculate total monthly take-home pay. Sui	9	7.	\$	1,959.48	\$		N/A	==:
		Stast into 6 non into 4.	٠.	Ψ==	1,939.40	Ψ_		IN/A	•
8.	8a. Net income regularly received: note income from rental property and profession, or farm Attach a statement for each property an receipts, ordinary and necessary busine monthly net income.	d business showing gross	8a.	\$	7 500 00	¢		NI	
	8b. Interest and dividends		8b.	\$	7,500.00	\$_ \$		N/A	
	8c. Family support payments that you, a	non-filing enques, or a dependent	OD.	Ψ	0.00	Φ		N/A	1
	regularly receive Include alimony, spousal support, child settlement, and property settlement.		8c.	\$	0.00	\$		N/A	
	8d. Unemployment compensation		8d.	\$_	0.00	\$		N/A	
	8e. Social Security		8e.	\$	0.00	\$		N/A	
	8f. Other government assistance that you include cash assistance and the value (in that you receive, such as food stamps (in Nutrition Assistance Program) or housing Specify:	if known) of any non-cash assistance benefits under the Supplemental g subsidies.	8f.	\$	0.00	\$		N/A	
	8g. Pension or retirement income		8g.	\$	0.00	\$		N/A	
	8h. Other monthly income. Specify:		8h.+	\$	0.00	+ \$		N/A	
9.	Add all other income. Add lines 8a+8b+8c+8	3d+8e+8f+8g+8h.	9.	\$	7,500.00	\$_		N/	A
10.	. Calculate monthly income. Add line 7 + line	9. 10	. \$.459.48 + \$		NIZA	- 0	0 450 40
	Add the entries in line 10 for Debtor 1 and Deb		ν. Ψ		,459.48 + \$		N/A	= \$	9,459.48
11.	State all other regular contributions to the election of the contributions from an unmarried partner other friends or relatives. Do not include any amounts already included in Specify:	expenses that you list in Schedule Jar, members of your household, your de	epend		-				0.00
12.	Add the amount in the last column of line 10 Write that amount on the Summary of Schedul applies) to the amount in line 11. The resules and Statistical Summary of Certain	t is th <i>Liabii</i>	e con lities a	nbined monthly and Related <i>Dat</i>	ncome a, if it	e. 12.	\$	9,459.48
							Ē	Combi	ned
13.	Do you expect an increase or decrease with No.	in the year after you file this form?						month	ly income
	Yes. Explain:								

Fil	l in this information to identify your case:					
De	btor 1 Allison D. Soto		С	heck if	this is:	
	btor 2] As		wing postpetition chapter the following date:
, ,	ited States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFO	ORNIA			1 / DD / YYYY	and remarking dates.
	se number				., 55,	
	cnown)					
0	official Form 106J					
	chedule J: Your Expenses					12/15
inf	as complete and accurate as possible. If two married people are formation. If more space is needed, attach another sheet to this mber (if known). Answer every question.	re filing together, both form. On the top of ar	are only	equally ditiona	responsible f Il pages, write	or supplying correct your name and case
Pa 1.	rt 1: Describe Your Household Is this a joint case?					
	■ No. Go to line 2.					
	☐ Yes. Does Debtor 2 live in a separate household?					
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	s for Separate Househo	ld of [Debtor	2.	
2.	Do you have dependents? No					
	Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Dependent's relations Debtor 1 or Debtor 2	hip to		Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.	Child			8	Yes
		Child			17	□ No ■ Yes
						□ No
		Child			18	Yes
						□ No □ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?					— 100
Par	t 2: Estimate Your Ongoing Monthly Expenses					
Est	timate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a suppolicable date.	ou are using this form elemental <i>Schedule J</i> ,	as a checl	supple the b	ement in a Cha ox at the top o	apter 13 case to report of the form and fill in the
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on Schedule I: Y ficial Form 106I.)	f you know 'our Income			Your expe	meac
(0)	ncial Form 100r.)				Tour expe	11363
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot;	nclude first mortgage	4.	\$		2,730.00
	If not included in line 4:					
	4a. Real estate taxes		4a.	\$		0.00
	4b. Property, homeowner's, or renter's insurance		4b.	\$		0.00
	4c. Home maintenance, repair, and upkeep expenses4d. Homeowner's association or condominium dues		4c.			250.00
5.	Additional mortgage payments for your residence, such as hon	ne equity loans	4d. 5.			0.00

Debtor 1	Allison D. Soto	Case num	ber (if known)	
S. Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	475.36
6b.	Water, sewer, garbage collection	6b.		204.25
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		405.78
6d.	Other. Specify:	6d.		
	od and housekeeping supplies	7.	\$	0.00
	Idcare and children's education costs	7. 8.	\$	0.00
	thing, laundry, and dry cleaning	9.		1,225.00
	sonal care products and services			350.00
	dical and dental expenses	10.		397.00
		11.	\$	50.00
∠. Ira Do	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	500.00
3 Ent	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	
4 Chi	ritable contributions and religious donations	13. 14.		300.00
	artable contributions and rengious donations	14.	Φ	50.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	150	¢	
	. Health insurance	15a.		0.00
		15b.		0.00
		15c.	\$	400.00
	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	cify:	16.	\$	0.00
inst	allment or lease payments:			
	Car payments for Vehicle 1	17a.		993.00
	Car payments for Vehicle 2	17b.	\$	879.00
	Other. Specify: Other Installment	17c.	\$	299.00
	Other. Specify:	17d.	\$	0.00
3. You	r payments of alimony, maintenance, and support that you did not report	as		
ded	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106	il). 18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe		19.		
). Oth	er real property expenses not included in lines 4 or 5 of this form or on Se	chedule I: Yo	our Income.	
20a.	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	\$	0.00
	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.		0.00
	er: Specify:	21.	2	
			. ψ	0.00
	ulate your monthly expenses			
	Add lines 4 through 21.		\$	9,508.39
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2	\$	-3000,000
	Add line 22a and 22b. The result is your monthly expenses.		\$	0.500.00
		1	Ψ	9,508.39
. Calc	ulate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	9,459.48
23b.	Copy your monthly expenses from line 22c above.	23b.		9,508.39
				3,500.35
23c.	Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	-48.91
For e	ou expect an increase or decrease in your expenses within the year after kample, do you expect to finish paying for your car loan within the year or do you expect you ication to the terms of your mortgage?	you file this ir mortgage pay	form? ment to increase or	decrease because of a
modif				
modif ■ N □ Y	0.			

Fill in this inf	formation to identify your	case:	1 2 12 12 1				
Debtor 1	Allison D. Soto						
Debtor 2	First Name	Middle Name	Last Name				
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the:	EASTERN DISTRICT	OF CALIFORNIA				
Case number		<u> </u>			☐ Check if this is an		
					amended filing		
Official Fo	rm 106Dec						
Declara	ation About a	n Individual	Debtor's Sch	edules	12/15		
if two married	people are filing togethe	r, both are equally resp	onsible for supplying corre	ct information.			
obtaining mor	this form whenever you fi ney or property by fraud ir . 18 U.S.C. §§ 152, 1341, 1	n connection with a ban	s or amended schedules. N kruptcy case can result in t	Making a false stat fines up to \$250,0	ement, concealing property, or 00, or imprisonment for up to 20		
s	ign Below						
Did you	pay or agree to pay some	one who is NOT an atto	rney to help you fill out ban	nkruptcy forms?			
■ No							
☐ Yes.	. Name of person			Attach Bani	kruptcy Petition Preparer's Notice,		
					, and Signature (Official Form 119)		
Under per that they	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are and correct.						

Allison D. Soto Signature of Debtor 1 Signature of Debtor 2

Date _____

Fil	l in this infor	nation to identify yo	ur case:			
_	btor 1	Allison D. Soto				
		First Name	Middle Name	Last Name		
1 .	btor 2 ouse if, filing)	First Name	Middle Name	Last Name	141	
1		nkruptcy Court for the	EASTERN DISTRICT C	OF CALIFORNIA		
Ca	se number				-	
	nown)					Check if this is an amended filing
~	··· · · -	407				
-	ficial Fo		Affaire for Indivi	duala Eilina far E) ankruntau	2412
				duals Filing for E	e equally responsible for su	04/2
info	rmation. If m	nore space is needed n). Answer every que	i, attach a separate sheet t	o this form. On the top of a	ny additional pages, write y	our name and case
		, , , ,	larital Status and Where Yo	ou Lived Before		
1.	What is you	r current marital stat	tus?			
	☐ Married ■ Not mar	ried				
2.			ı lived anywhere other thar	where you live now?		
	_	act o youro, navo you	invocatily where other than	where you live now :		
	■ No □ Yes. Lis	t all of the places you	lived in the last 3 years. Do	not include where you live no	w.	
	Debtor 1:		Dates Debtor ' lived there	1 Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
3. state	Within the la	i st 8 years, did you e es include Arizona, Ca	ever live with a spouse or lo alifornia, Idaho, Louisiana, N	egał equivalent in a commu levada, New Mexico, Puerto I	inity property state or territo Rico, Texas, Washington and	ry? (Community property Wisconsin.)
	□ No					
	Yes. Ma	ke sure you fill out So	hedule H: Your Codebtors (Official Form 106H).		
Par	t 2 Explain	n the Sources of You	ur Income			
4.	Fill in the tota	I amount of income yo	ou received from all jobs and	ng a business during this y all businesses, including par ve together, list it only once u	rear or the two previous cale t-time activities. Inder Debtor 1.	∍ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,500.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

□ No.
■ Yes

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

an attorney for this bankruptcy case.

□ No

Case title

Case number

Yes. Fill in the details.

Court or agency

Nature of the case

Status of the case

	Case title Case number	Nature of the case	Court or agency	Status of t	he case
	California Farm Management, Inc. VS. Allison Devoree Soto, an individual and dba Allison Soto Contracting,	Civil	Superior Court County of Tulare 221 S Mooney Blvd Rm 2 Visalia, CA 93291	☐ On app	eal
	a sole proprietorship VCL304855			Summons	3
10.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below	y, was any of your prope	erty repossessed, foreclosed,	garnished, attache	d, seized, or levied?
	No. Go to line 11.				
	☐ Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property		Date	Value of the
		Explain what happened			property
11.	Within 90 days before you filed for bankrupt accounts or refuse to make a payment beca	cy, did any creditor, incluse you owed a debt?	luding a bank or financial inst	itution, set off any	amounts from your
	Yes. Fill in the details.				
	Creditor Name and Address	Describe the action the		Date action was taken	Amount
12.	Within 1 year before you filed for bankruptcy court-appointed receiver, a custodian, or an	y, was any of your prope other official?	rty in the possession of an as	signee for the ben	efit of creditors, a
	No				
	☐ Yes				
Pa	rt 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrupto ■ No	cy, did you give any gifts	with a total value of more tha	ın \$600 per person	?
	Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankrupto No Yes. Fill in the details for each gift or contri		or contributions with a total v	alue of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)			Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankruptcy disaster, or gambling?	or since you filed for ba	nkruptcy, did you lose anythii	ng because of thef	t, fire, other
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and Des	cribe any insurance cov		Date of your	Value of property lost
	pen	ude the amount that insurations on lateral of the contract of	ance has paid. List		1050

Case number (if known)

Debtor 1 Allison D. Soto

D	ebtor 1	Allison D. Soto		Ca	se number (if known)	
P	art 7:	ist Certain Payments or Transfer	re			
	-					
16	consu	1 year before you filed for bankro ted about seeking bankruptcy or any attorneys, bankruptcy petition	preparing a bankruptcy	petition?		
	□ No	n				
		es. Fill in the details.				
	Perso	n Who Was Paid	Description ar	nd value of any proper	ty Date payment	Amount o
	Addre	ss or website address	transferred	, ,	or transfer was	paymer
		n Who Made the Payment, if Not	You		made	
		OFFICES OF MARK A.	Attorney Fee	s	10/09/2024	\$3,000.0
		ERMAN I. Douty St.				
	HANF	ORD, CA 93230				
	notic	es@zimmermanesq.com				
17,	promis	1 year before you filed for bankrused to help you deal with your cre include any payment or transfer that	ditors or to make payme	else acting on your bents to your creditors?	ehalf pay or transfer any prop	erty to anyone who
	■ No) ⁵ /				
	☐ Ye	es. Fill in the details.				
		n Who Was Paid	Description an	d value of any proper	ty Date payment	Amount o
	Addre	SS	transferred		or transfer was made	paymen
18	Within	2 years before you filed for bankr	unter did you call trad	o or otherwise tref		
	Include	rred in the ordinary course of you both outright transfers and transfers gifts and transfers that you have alr	ur business or financial s made as security (such	affairs? as the granting of a sec		· · · ·
	■ No					
	☐ Ye	s. Fill in the details.				
	Persor Addres	n Who Received Transfer ss	Description an property transf	erred	Describe any property or payments received or debts paid in exchange	Date transfer was made
	Persor	's relationship to you			paid in exchange	
19.	Denenc	10 years before you filed for bank iary? (These are often called asset	kruptcy, did you transfer -protection devices.)	any property to a self	-settled trust or similar device	of which you are a
	■ No					
		s. Fill in the details.				
	Name o	or trust	Description and	d value of the property	/ transferred	Date Transfer was made
Pa	rt 8: Li	st of Certain Financial Accounts,	Instruments, Safe Depo	sit Boxes, and Storag	e Units	
20.	Within 1	year before you filed for bankru	ptcy, were any financial	accounts or instrume	nts held in your name, or for v	our benefit closed
	Include	oved, or transferred? checking, savings, money marke pension funds, cooperatives, as	et, or other financial acco	ounts: certificates of c		
	■ No	rando, ocoperatives, as	oosiations, and other fir	ianciai msututions.		
	_	s. Fill in the details.				
		of Financial Institution and S (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold,	Last balance before closing or
	ovue)				moved, or transferred	transfer

Address (Number, Street, City, State and ZIP Code) No No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents	or securities, o you still ve it?
Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do Address (Number, Street, City, State and ZIP Code)	
Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)	
Address (Number, Street, City, State and ZIP Code)	
■ No □ Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do Address (Number, Street, City, State and ZIP Code) to it?	
☐ Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do Address (Number, Street, City, State and ZIP Code) to it?	
Name of Storage Facility Who else has or had access Describe the contents Do Address (Number, Street, City, State and ZIP Code) to it?	
Address (Number, Street, City, State and ZIP Code) to it?	
State and ZIP Code)	you still ve it?
Part 9: Identify Property You Hold or Control for Someone Else	
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or for someone.	hold in trust
■ No	
☐ Yes. Fill in the details.	
Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Code) Describe the property Code)	Value
Part 10: Give Details About Environmental Information	
For the purpose of Part 10, the following definitions apply:	
Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statuting regulations controlling the cleanup of these substances, wastes, or material.	
Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or ut to own, operate, or utilize it, including disposal sites.	ilize it or used
Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance hazardous material, pollutant, contaminant, or similar term.	tance,
Report all notices, releases, and proceedings that you know about, regardless of when they occurred.	
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental	law?
■ No	
☐ Yes. Fill in the details.	
Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Code te of notice	
25. Have you notified any governmental unit of any release of hazardous material?	
■ No	
☐ Yes. Fill in the details.	
Name of site Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and Know it ZIP Code)	

Case number (if known)

Debtor 1 Allison D. Soto

De	otor 1 Allison D. Soto		Case number (if known)	
			(
26.	Have you been a party in any judicial or ad	ministrative proceeding under any en	vironmental law? Include settlement	s and orders.
	■ No			
	☐ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pa	Give Details About Your Business or	Connections to Any Business		
27.	Within 4 years before you filed for bankrup	otcy, did you own a business or have a	any of the following connections to a	ny business?
	■ A sole proprietor or self-employed	in a trade, profession, or other activity	y, either full-time or part-time	
	☐ A member of a limited liability com	pany (LLC) or limited liability partners	hip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing e	xecutive of a corporation		
	☐ An owner of at least 5% of the votin	ng or equity securities of a corporation	1	
	$\hfill \square$ No. None of the above applies. Go to	Part 12.		
	Yes. Check all that apply above and fi	II in the details below for each busines	SS.	
	Business Name Address	Describe the nature of the business		
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security	/ number or ITIN.
	Allison Soto Contracting	Contracting	Dates business existed EIN:	
	-	•	From-To 03/2007-09/2023	
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address	tcy, did you give a financial statement Date Issued	to anyone about your business? Inc	ilude all financial
i svan	(Number, Street, City, State and ZIP Code)			
I hav are t with 18 U	re read the answers on this Statement of Firue and correct. I understand that making a bankruptcy case can result in fines up to \$5,152,1341, 1519, and 3571.	false statement, concealing property, \$250,000, or imprisonment for up to 2	or obtaining money or property by f	that the answers raud in connection
	son D. Soto nature of Debtor 1	Signature of Debtor 2		
Date	11/25/24	Date		
Did y ■ N □ Y		ent of Financial Affairs for Individuals	Filing for Bankruptcy (Official Form	107)?
■ N	_			
☐ Ye	es. Name of Person Attach the <i>Bankru</i>	ptcy Petition Preparer's Notice, Declarat	ion, and Signature (Official Form 119).	

Fill in this infor	rmation to identify your	case;		
Debtor 1	Allison D. Soto			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	PF CALIFORNIA	
Case number				
(if known)				☐ Check if this is
				amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

Yes

□ No

Yes

If you are an individual filing under chapter 7, you must fill out this form if:

creditors have claims secured by your property, or

Description of 2019 GMC Yukon 75000 miles

you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? Creditor's Capital One Auto Finan ☐ No ☐ Surrender the property. name: Retain the property and redeem it.

Retain the property and enter into a

Reaffirmation Agreement.

Retain the property and [explain]: securing debt: **Maintain Payments** Creditor's **Drivetime/Bridgecrest** ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Description of 2018 Mercedes-Benz C300 Reaffirmation Agreement. 90000 miles property Retain the property and [explain]: securing debt: **Maintain Payments**

Creditor's Performance Finance ☐ Surrender the property. □ No name: ☐ Retain the property and redeem it. Yes ☐ Retain the property and enter into a Description of 2022 Indian Scout Reaffirmation Agreement. property

Official Form 108

property

Retain the property and [explain]:

Debtor 1 Allison D. Soto	Case number (if known)
securing debt:	Maintain Payments
in the information below. Do not list real estate leas	eases I listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill ses. Unexpired leases are leases that are still in effect; the lease period has not yet ended. ease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Part 3: Sign Below	
Under penalty of periory, declare that I have indica property that is subject to an unexpired lease.	ted my intention about any property of my estate that secures a debt and any personal
Allison D. Soto Signature of Debtor 1	Signature of Debtor 2
Date 11 25 24	Date

Fill in this information to identify your case:			directed in this form and in For	m
Debtor 1 Allison D. Soto		22A-1Supp:		
Debtor 2 (Spouse, if filing)	====	■ 1. There is no pre	sumption of abuse	
United States Bankruptcy Court for the: Eastern Dist	trict of California		to determine if a presumption	
			made under <i>Chapter 7 Means</i> fficial Form 122A-2).	Test
Case number (if known)		<u> </u>	·	_ £
,			it does not apply now because ry service but it could apply late	
		☐ Check if this is		
Official Form 122A - 1			an amondod ming	
Chapter 7 Statement of Your	Current Monthly In	como		40/4
Chapter / Statement of Tour	Current Working in	COME		12/1
Be as complete and accurate as possible. If two married pe- separate sheet to this form. Include the line number to whic number (if known). If you believe that you are exempted froi military service, complete and file Statement of Exemption in	th the additional information applies. (m a presumption of abuse because yo from Presumption of Abuse Under § 7	On the top of any addition ou do not have primarily	nal pages, write your name and co	ase
Part 1: Calculate Your Current Monthly Income				
1. What is your marital and filing status? Check	one only.			
Not married. Fill out Column A, lines 2-11.				
\square Married and your spouse is filing with you.	Fill out both Columns A and B, line	es 2-11.		
\square Married and your spouse is NOT filing with	you. You and your spouse are:			
\square Living in the same household and are no	ot legally separated. Fill out both 0	Columns A and B, lines	2-11.	
☐ Living separately or are legally separated	d. Fill out Column A, lines 2-11; do	not fill out Column B. E	y checking this box, you decla	re under
penalty of perjury that you and your spouse living apart for reasons that do not include	e are legally separated under nonba	ankruptcy law that appl nts_11 U.S.C.& 707(b)	ies or that you and your spous	e are
Fill in the average monthly income that you received from				
101(10A). For example, if you are filing on September 15, th 6 months, add the income for all 6 months and divide the tot	e 6-month period would be March 1 thro	ugh August 31. If the amor	int of your monthly income varied di	iring the
the same rental property, put the income from that property i	n one column only. If you have nothing to	o report for any line, write	nan once. For example, if both spot 30 in the space.	ses own
		Column A	Column B	
		Debtor 1	Debtor 2 or non-filing spouse	
2. Your gross wages, salary, tips, bonuses, over	time, and commissions (before		non-ming spouse	
all payroll deductions).	·	\$ 416.67	\$	
 Alimony and maintenance payments. Do not in Column B is filled in. 	clude payments from a spouse if	\$ 0.00	\$	
All amounts from any source which are regula	rly naid for household expenses		Ψ	
of you or your dependents, including child sup	port. Include regular contributions			
from an unmarried partner, members of your hous and roommates. Include regular contributions from	sehold, your dependents, parents,			
filled in. Do not include payments you listed on lin	e 3.	\$ 0.00	\$	
5. Net income from operating a business, profess	sion, or farm			
	Debtor 1			
Gross receipts (before all deductions)	\$ 9,583.33			
Ordinary and necessary operating expenses	-\$0.00_			
Net monthly income from a business, profession, or farm	Copy \$ 9,583.33 here ->	s 9.583.33	\$	
Net income from rental and other real property		φ <u>σ,σσοίσσ</u>	Ψ	
o. The modified form formal and other real property	Debtor 1			
Gross receipts (before all deductions)	\$ 0.00			
Ordinary and necessary operating expenses	-\$ 0.00			
Net monthly income from rental or other real propo	erty \$ 0.00 Copy here ->	\$ 0.00	\$	
7. Interest, dividends, and royalties		\$ 0.00	\$	

7. Interest, dividends, and royalties

Debtor 1	Alliso	on D. Soto	<u>.</u>		Case numb	er (if known)		
					Column A Debtor 1		Column B Debtor 2 c	
8. U	nemploy	ment compensation			\$	0.00	\$	
		er the amount if you contend that the amou social Security Act. Instead, list it here:	unt received was a ben	efit	-			
	For you		\$ 0	.00				
	For your	spouse	\$					
be do Ui di re th	ension or enefit undo not inclu nited State sability, or etired pay lat it does	retirement income. Do not include any a er the Social Security Act. Also, except as de any compensation, pension, pay, annu- es Government in connection with a disab- r death of a member of the uniformed serv- paid under chapter 61 of title 10, then inclu- not exceed the amount of retired pay to we tired under any provision of title 10 other t	stated in the next sent wity, or allowance paid be illity, combat-related injudices. If you received are ude that pay only to the which you would otherwi	ence, by the ury or ny e extent ise be	\$	0.00	\$	
10. In Do re do the	come fro o not inclu ceived as omestic te e United S	m all other sources not listed above. So the any benefits received under the Social a victim of a war crime, a crime against horrorism; or compensation pension, pay, a States Government in connection with a dit, or death of a member of the uniformed so a separate page and put the total below.	specify the source and a Security Act; payment umanity, or internationa nnuity, or allowance pa sability, combat-related	amount. ts al or aid by d injury				
	×				\$	0.00	\$	
	-				\$	0.00	\$	
	To	tal amounts from separate pages, if any.		+	\$	0.00	\$	
ea	ach colum	our total current monthly income. Add In. Then add the total for Column A to the standard the total for Column A to the standard the monthly income. Applies	total for Column B.	\$ 10	0,000.00	+ \$		Total current monthly income
	=1,	our current monthly income for the yea						
		our total current monthly income from line			Сор	y line 11 h	ere=>	\$ 10,000.00
	Multiply	y by 12 (the number of months in a year)						x 12
12	b. The res	sult is your annual income for this part of t	he form				12b	. \$_120,000.00
13. C a	alculate th	ne median family income that applies to	you. Follow these ste	ps:				
Fill	I in the sta	ate in which you live.	CA					
Fill	I in the nu	mber of people in your household.	4					115
To	find a list	edian family income for your state and size of applicable median income amounts, go . This list may also be available at the ban	online using the link s	specified	in the sepa	rate instruc	13. tions	\$127,096.00
		lines compare?						
14:	a. 🔳	Line 12b is less than or equal to line 13. Go to Part 3. Do NOT fill out or file Officia	On the top of page 1, ch Il Form 122A-2.	neck box	1, There is	no presum	ption of abus	se.
141	b. 🗆	Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.		, The pre	sumption o	of abuse is	determined b	y Form 122A-2.
art 3:	Sign	Below						
	By sign	ng here, declare under penalty of perjun	that the information	- Abla of	toment and	lin any atte	obmonto is a	

Allison D. Soto Signature of Debtor 1

Debtor 1 Allison D. Soto	Case number (if known)
Date 11 25 2024	

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 05/01/2024 to 10/31/2024.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employment

Income by Month:

moonie of mondi		
6 Months Ago:	05/2024	\$0.00
5 Months Ago:	06/2024	\$0.00
4 Months Ago:	07/2024	\$0.00
3 Months Ago:	08/2024	\$0.00
2 Months Ago:	09/2024	\$0.00
Last Month:	10/2024	\$2,500.00
	Average per month:	\$416.67

Line 5 - Income from operation of a business, profession, or farm

Source of Income: Employment(1099)

Income/Expense/Net by Month:

_	Date	Income	Expense	Net
6 Months Ago:	05/2024	\$10,000.00	\$0.00	\$10,000.00
5 Months Ago:	06/2024	\$10,000.00	\$0.00	\$10,000.00
4 Months Ago:	07/2024	\$10,000.00	\$0.00	\$10,000.00
3 Months Ago:	08/2024	\$10,000.00	\$0.00	\$10,000.00
2 Months Ago:	09/2024	\$10,000.00	\$0.00	\$10,000.00
Last Month:	10/2024	\$7,500.00	\$0.00	\$7,500.00
	Average per month:	\$9,583.33	\$0.00	
			Average Monthly NET Income:	\$9,583.33

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	_
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$571	administrative fee
	\$1,738	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee		
+	\$78	administrative fee		
	\$278	total fee		

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations.

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of California

In	re _ Allison D. Soto		Case No.	4			
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPENSA	TION OF ATTOR	NEY FOR DE	EBTOR(S)			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
				3,000.00			
	Prior to the filing of this statement I have received		\$	3,000.00			
	Balance Due			0.00			
2.	\$ of the filing fee has been paid.						
3.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
4.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
5.	■ I have not agreed to share the above-disclosed compensation	on with any other person u	unless they are members	pers and associates of my	y law firm.		
	☐ I have agreed to share the above-disclosed compensation v copy of the agreement, together with a list of the names of				firm. A		
6.	In return for the above-disclosed fee, I have agreed to render le	egal service for all aspects	of the bankruptcy c	ase, including:			
	 a. Analysis of the debtor's financial situation, and rendering at b. Preparation and filing of any petition, schedules, statement c. Representation of the debtor at the meeting of creditors and d. [Other provisions as needed] NONE. 	of affairs and plan which:	may be required;		tcy;		
7.	By agreement with the debtor(s), the above-disclosed fee does REPRESENTATION WITH RESPECT TO CONT TO DISCHARGABILITY OF PARTICULAR DEB	TESTED PROCEEDING		SUES AS TO COMP	LAINTS		
	CE	RTIFICATION					
thic	I certify that the foregoing is a complete statement of any agree bankruptcy proceeding.	ement or arrangement for	rayment to me for re	presentation of the debto	or(s) in		
tills	oankrupicy proceeding.	Mila.	2				
-	11-25-24 Date	MARK A. ZIMMER	MAN 179762		=		
		Signature of Attorney					
		LAW OFFICES OF 707 N. Douty St.	MARK A. ZIMME	RMAN			
		HANFORD, CA 932					
		559-584-7274 Fax notices@zimmerm					
		Name of law firm			2		